




**PATENT NUMBER**

<p>  </p> <p> O.I.P.E. </p> <p> SCANNED  O.A. <u>CS</u> </p>	<p>PATENT DATE</p>
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**TITLE OF INVENTION:**

**APPLICANT(S):**

 <b>TERMINAL DISCLAIMER</b>	<b>DRAWINGS</b>			<b>CLAIMS ALLOWED</b>	
	Sheets Drwg.	Figs. Drwg.	Print Fig.	Total Claims	Print Claim for O.G.
<input checked="" type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.  <input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S. Patent No. _____  <input type="checkbox"/> The terminal _____ months of this patent have been disclaimed.	_____ (Assistant Examiner) _____ (Date)			<b>NOTICE OF ALLOWANCE MAILED</b>	
	_____ (Primary Examiner) _____ (Date)			<b>ISSUE FEE</b>	
				Amount Due	Date Paid
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